

POSITIO..	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>3/16/89</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>7</i>	<i>3-22-89</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>3-26-89</i>	

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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